Fill in this information to identify the case:							
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G							
Debtor 2 (Spouse, if filing)	· · · · · · · · · · · · · · · · · · ·						
United States	United States Bankruptcy Court for the: Southern District of New York						
Case number	09-50026 (REG)						

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents, Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

ľ	art 1: Identify the Claim							
1.	Who is the current creditor?	Eugene Landry Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor						
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?						
3.	Where should notices and payments to the creditor be sent?	ayments to the different)	ıld payments to the credit	or be sent? (if				
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, PC - ATTN: Lisa M. Norman			Name			
			1885 St. James Place, 15th Floor					
		Number Street	iace, ioui ric	JOI	Number	Street		
		Houston	TX	77056				
		City	State	ZIP Code	City	State	ZIP Code	
		Contact phone 713-85	0-4200		Contact phone			
		Contact email Lnorma	an@andrews	myers.com	Contact email			
		Uniform claim identifier fo	r electronic payme	nts in chapter 13 (if you u	se one):			
4.	Does this claim amend one already filed?	No Yes. Claim number	er on court claim	s registry (if known)		Filed on	DD / YYYY	
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the	ne earlier filing?					

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 2 of 61

ı	Part 2: Give Informatio	n About the Claim as of the Date the Case Was Filed					
6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
7.	How much is the claim?	SUNGUIGATED. Does this amount include interest or other charges? ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).					
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch					
9.	Is all or part of the claim secured?	No					
10	. Is this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$					
11	. Is this claim subject to a right of setoff?	☑ No ☐ Yes. Identify the property:					

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 3 of 61

12. Is all or part of the claim entitled to priority under	☑ No					
11 U.S.C. § 507(a)?	Yes. Check	one:	Amount entitled to priority			
A claim may be partly priority and partly		c support obligations (including alimony and cl c. § 507(a)(1)(A) or (a)(1)(B).	\$			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		,850* of deposits toward purchase, lease, or ro, family, or household use. 11 U.S.C. § 507(a)	\$			
, , , , , , , , , , , , , , , , , , ,	bankrupt	salaries, or commissions (up to \$12,850*) earr cy petition is filed or the debtor's business end c. § 507(a)(4).	\$			
	☐ Taxes or	penalties owed to governmental units. 11 U.S	S.C. § 507(a)(8	3).	\$	
	☐ Contribu	tions to an employee benefit plan. 11 U.S.C. §	§ 507(a)(5).		\$	
	Other. S	pecify subsection of 11 U.S.C. § 507(a)() th	at applies.		\$	
	* Amounts a	e subject to adjustment on 4/01/19 and every 3 year	rs after that for c	ases begun on or afte	er the date of adjustment,	
Part 3: Sign Below	<u> </u>					
The person completing	Check the approp	priate box:				
this proof of claim must sign and date it.	☐ I am the cred					
FRBP 9011(b).	_	ditor's attorney or authorized agent.				
If you file this claim electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.					
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules specifying what a signature	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the					
is.	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date	uted on date 08/24/2017 MM / DD / YYYY				
	/s/ Lisa M	. Norman Sisam N	DRMA	<u>N</u>		
	Print the name of	of the person who is completing and signin	ng this claim:			
	Name	Lisa M. Norman First name Middle name		Last name		
	Title	Attorney				
	Company	Andrews Myers, PC Identify the corporate servicer as the company if the	ne authorized ag	ent is a servicer.		
	Address	1885 St. James Place, 15th Floor				
		Houston	TX	77056		
		City	State	ZIP Code		
	Contact phone	713-850-4200	Email	Lnorman@and	drewsmyers.com	

Last Name of Claimant	Landry
First Name of Claimant	Eugene
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Lafayette Parish, Louisiana
Accident Description	Claimant lost control of his vehicle, resulting in fatal injuries to Claimant
Injury Description	Head Injury; Concussion
Airbag Deployed	No
	CONTRACTOR OF THE CONTRACTOR O
Date of Injury	04/10/06
Year and Model of Vehicle	2003 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 5 of 61

Fill in this information to identify the case:							
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Q							
Debtor 2 (Spouse, if filing)							
United States	Bankruptcy Court for the: Southern District of New York						
Case number	09-50026 (REG)						

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1.	Who is the current creditor?	Gina Lawrimore Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor						
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	n?	70 - 10 - 10				
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notic			Where should payments to the creditor be s different)			
		Name	ews Myers, PC - ATTN: Lisa M. Norman Norman Norman Norman		Name			
		Number Street Houston	TX	77056	Number Street			
		Contact phone 713-8 Contact email Lnorm		ZIP Code		State		
		Uniform claim identifier	. •	ents in chapter 13 (if you u	•			
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numl	ber on court claim	is registry (if known) _		Filed on	D / YYYY	
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?	-	4)			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 6 of 61

F	Part 2: Give Informatio	n About the Claim as of the Date the Case Was Filed
6.	Do you have any number you use to identify the debtor?	No Ses. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	Does this amount include interest or other charges? ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Other Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount necessary to cure any default as of the date of the petition: \$
10.	Is this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$
11.	Is this claim subject to a right of setoff?	☑ No ☐ Yes. Identify the property:

Official Form 410

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 7 of 61

	-						
12. Is all or part of the claim entitled to priority under	☑ No						
11 U.S.C. § 507(a)?	Yes. Check			Amount entitled to priority			
A claim may be partly priority and partly nonpriority. For example,		Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).					
in some categories, the law limits the amount entitled to priority.		2,850* of deposits toward purchase, lease, or rental of I, family, or household use. 11 U.S.C. § 507(a)(7).	property or services for	\$			
, ,	bankrup	salaries, or commissions (up to \$12,850*) earned with toy petition is filed or the debtor's business ends, which c. § 507(a)(4).		\$			
	☐ Taxes o	r penalties owed to governmental units. 11 U.S.C. § 5	07(a)(8).	\$			
	☐ Contribu	itions to an employee benefit plan. 11 U.S.C. § 507(a))(5).	\$			
	Other. S	pecify subsection of 11 U.S.C. § 507(a)() that appli	ies.	\$			
	* Amounts a	re subject to adjustment on 4/01/19 and every 3 years after t	hat for cases begun on or aft	ter the date of adjustment.			
Part 3: Sign Below							
The person completing	Check the appro	priate box:					
this proof of claim must sign and date it.	☐ I am the cre	ditor					
FRBP 9011(b).		ditor's attorney or authorized agent.					
If you file this claim	☐ I am the trus	stee, or the debtor, or their authorized agent. Bankrup	tcy Rule 3004.				
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules							
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
A person who files a							
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.	Executed on date 08/24/2017 MM / DD / YYYY						
	/s/ Lisa M	Norman Sisam. Nor	enan				
	Print the name of	of the person who is completing and signing this	claim:				
	Name	Lisa M. Norman First name Middle name	Last name	·			
	Title	Attorney					
	Company	Andrews Myers, PC Identify the corporate servicer as the company if the autho	rized agent is a servicer.				
		1885 St. James Place, 15th Floor					
	Address	Number Street					
		Houston	TX 77056				
		City	State ZIP Code				
	Contact phone	713-850-4200	Email Lnorman@an	drewsmvers.com			

Last Name of Claimant	Lawrimore
First Name of Claimant	Gina
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Aynor, South Carolina
Accident Description	Claimant lost control of her vehicle and hit a tractor, resulting in paralyzing injuries to Claimant
Injury Description	Level 3 Paraplegic, Spinal Surgery
Airbag Deployed	No
Date of Injury	09/13/12
Year and Model of Vehicle	1999 Pontiac Grand Prix
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes - Bachelder, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 9 of 61

Fill in this information to identify the case:							
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors 😭							
Debtor 2 (Spouse, if filing) ————————————————————————————————————						
United States	Bankruptcy Court for the: Southern District of New York						
Case number	<u>09-50026 (REG)</u>						

Official Form 410

Proof of Claim 04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both, 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	Part 1: Identify the CI	aim						
1.	Who is the current creditor?	Melinda Lynch Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor No Yes. From whom?						
2.	Has this claim been acquired from someone else?							
3.	3. Where should notices and payments to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman		Where should different)	payments to the creditor b	e sent? (if			
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James			Name			
		Number Street Houston City	TX State	77056	Number S	State	ZIP Code	
		Contact phone 713-8		ZIF Code		State		
		Contact email Lnorman@andrewsmyers.com Contact email					-	
		Uniform claim identifier	orm claim identifier for electronic payments in chapter 13 (if you		ŕ			
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	ber on court claim	s registry (if known)		Filed on	/ YYYY	
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes, Who made	the earlier filing?	-				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 10 of 61

P	art 2: Give I	nformatio	n About the Claim as of the Date the Case Was Filed		
6.	Do you have an you use to iden debtor?		No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:		
7.	How much is th	e claim?	Does this amount include interest or other charges? ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other		
			charges required by Bankruptcy Rule 3001(c)(2)(A).		
8.	What is the bas claim?	is of the	examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Ittach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Imit disclosing information that is entitled to privacy, such as health care information.		
			Personal injury claim - ignition switch		
9.	Is all or part of secured?	the claim	No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount necessary to cure any default as of the date of the petition: Annual Interest Rate (when case was filed) Fixed Variable		
10	. Is this claim ba	sed on a	☑ No		
			Yes. Amount necessary to cure any default as of the date of the petition.		
11	. Is this claim sul right of setoff?	bject to a	✓ No ☐ Yes. Identify the property:		

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 11 of 61

12. Is all or part of the claim entitled to priority under	☑ No				
11 U.S.C. § 507(a)?	Yes. Check	one:		Amount entitled to priority	
A claim may be partly priority and partly		c support obligations (including alimony and child sup c. § 507(a)(1)(A) or (a)(1)(B).	port) under	\$	
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		,850* of deposits toward purchase, lease, or rental of , family, or household use. 11 U.S.C. § 507(a)(7).	property or services for	\$	
G	bankrupt	salaries, or commissions (up to \$12,850*) earned with cy petition is filed or the debtor's business ends, whice c. § 507(a)(4).		\$	
	Taxes or	penalties owed to governmental units. 11 U.S.C. § 5	07(a)(8).	\$	
	☐ Contribu	tions to an employee benefit plan. 11 U.S.C. § 507(a)	(5).	\$	
	Other. S	pecify subsection of 11 U.S _. C _. § 507(a)() that appli	es.	\$	
	* Amounts a	re subject to adjustment on 4/01/19 and every 3 years after th	nat for cases begun on or aff	ter the date of adjustment.	
Part 3: Sign Below					
The person completing	Check the approp	priate box:			
this proof of claim must sign and date it.	□ I am the creditor.				
FRBP 9011(b).	☑ I am the creditor. ☑ I am the creditor's attorney or authorized agent.				
If you file this claim	_ :::::::::::::::::::::::::::::::::::::	stee, or the debtor, or their authorized agent. Bankrup	tcv Rule 3004.		
electronically, FRBP	_	antor, surety, endorser, or other codebtor. Bankruptcy	-		
5005(a)(2) authorizes courts to establish local rules	9	,,,,			
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
A person who files a					
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.				
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.				
3571.	Executed on date 09/19/2017 MM / DD / YYYY				
		0			
	/s/ Lisa M	. Norman Sisamilar	man		
	Print the name of	of the person who is completing and signing this	claim:		
	Name	Lisa M. Norman First name Middle name	Last name		
	Title	Attorney			
	Company	Andrews Myers, PC			
	- 2paj	Identify the corporate servicer as the company if the autho	rized agent is a servicer.		
	Address	1885 St. James Place, 15th Floor		-	
		Number Street	TV 33050		
		Houston	TX 77056		
		City	State ZIP Code		
	Contact phone	713-850-4200	Email Lnorman@an	drewsmyers.com	

Last Name of Claimant	Lynch
First Name of Claimant	Melinda
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Plano, TX
Accident Description	Traveling on Legacy and Preston Meadow with husband and 3 kids, client was in passenger side front seat. Person ran a red light and hit the passenger side of vehicle causing it to spin and hit a fire hydrant on passenger side. Jaws of life to remove client from car.
Injury Description	Brain injury, spine injuries, multiple surgeries: Cervical Spine Fusion from C3- T2
Airbag Deployed	No
Date of Injury	11/24/2002
Year and Model of Vehicle	2002 Cadillac Deville DTS
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes, recover money for medical bills. Lawyer Lynn McGrew.
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to
Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Q				
Debtor 2 (Spouse, if filing)				
United States	United States Bankruptcy Court for the: Southern District of New York			
Case number	09-50026 (REG)			

Official Form 410

Proof of Claim

04/16

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Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	art 1: Identify the CI	aim					
1.	Who is the current creditor?	Louella Martinez Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	1?				
3.	Where should notices and payments to the creditor be sent?	Where should notice Andrews Myers,			different)	payments to the creditor	be sent? (if
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James F Number Street Houston	Place, 15th Flo	77056	Name Number Str	reet	
ŀ		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 713-88		myers.com	Contact phone _ Contact email _		
		Uniform claim identifier f		nts in chapter 13 (if you u	·		
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numb	oer on court claim	s registry (if known) _		Filed on	/ YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?	3	-		

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 14 of 61

P	art 2: Give Information About the Claim as of the Date the Case Was Filed				
6.	Do you have any number you use to identify the debtor?	No ☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
7.	How much is the claim?	standarde Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).			
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch			
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property:			
10	ls this claim based on a lease?	✓ No ☐ Yes. Amount necessary to cure any default as of the date of the petition.			
11	Is this claim subject to a right of setoff?	☑ Yes. Identify the property:			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 15 of 61

12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	one:		Amount entitled to priority		
A claim may be partly priority and partly		c support obligations (including alimony and child support $5.5 \times 507(a)(1)(A)$ or $5.5 \times 507(a)(1)(A)$ or $5.5 \times 507(a)(1)(A)$	port) under	\$		
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		850* of deposits toward purchase, lease, or rental of family, or household use. 11 U.S.C. § 507(a)(7).	property or services for	\$		
Chance to provide	bankrupt	salaries, or commissions (up to $12,850^*$) earned with cy petition is filed or the debtor's business ends, whic i. § $507(a)(4)$.	nin 180 days before the chever is earlier.	\$		
	☐ Taxes or	penalties owed to governmental units. 11 U.S.C. § 50	07(a)(8).	\$		
	☐ Contribu	tions to an employee benefit plan. 11 U.S.C. § 507(a)	(5).	\$		
	Other. S	pecify subsection of 11 U.S.C. § 507(a)() that applie	es.	\$		
	* Amounts ar	e subject to adjustment on 4/01/19 and every 3 years after th	nat for cases begun on or a	fter the date of adjustment,		
Part 3: Sign Below						
The person completing this proof of claim must	Check the approp	priate box:				
sign and date it.	,	☐ I am the creditor.				
FRBP 9011(b).	I am the creditor's attorney or authorized agent.					
If you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.					
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules						
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a						
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date	09/19/2017 MM / DD / YYYY				
	/s/ Lisa M Signature	Norman Sisumorm	ran			
	Print the name of	of the person who is completing and signing this o	claim:			
	Name	Lisa M. Norman First name Middle name	Last name			
	Title	Attorney				
	0	Andrews Myers, PC				
	Company	Identify the corporate servicer as the company if the author	rized agent is a servicer.			
	Address	1885 St. James Place, 15th Floor				
		Number Street				
		Houston	TX 77056			
		City	State ZIP Code			
	Contact phone	713-850-4200	Email Lnorman@ar	drewsmyers.com		

Last Name of Claimant	Martinez
First Name of Claimant	Louella
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Las Alamos, NM
Accident Description	Client was driving on the freeway when a man walked out in front of her. She avoided hitting him but hit an embankment of dirt and rolled her vehicle 4 times.
Injury Description	Had pins put in 4 of her fingers, all nerves severed in left hand
Airbag Deployed	No
Date of Injury	03/15/2008
Year and Model of Vehicle	* Pontiac Grand Prix
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	*
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Debtor 2 (Spouse, if filling)				
				United States
Case number 09-50026 (REG)				

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

P	art 1: Identify the Cl	aim		
1.	Who is the current creditor? Becky Masternak Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor			
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?		
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, PC - ATTN: Lisa M. Norman Name 1885 St. James Place, 15th Floor Number Street Houston TX 77056 City State ZIP Code Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com Uniform claim identifier for electronic payments in chapter 13 (if you under the contact of	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone Contact email	
4.	Does this claim amend one already filed?	✓ No☐ Yes. Claim number on court claims registry (if known)	Filed on	
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?		

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 18 of 61

Part 2: Give Information About the Claim as of the Date the Case Was Filed				
6.	Do you have any number you use to identify the debtor?	✓ No ☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:		
7.	How much is the claim?	Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).		
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch		
9. Is all or part of the claim secured? The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's practical Form 410-A) with the Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show example, a mortgage, lien, certificate of title, financing state been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: \$		Yes. The claim is secured by a lien on property.		
10	. Is this claim based on a lease?	☐ Variable ✓ No ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$		
11	ls this claim subject to a right of setoff?	✓ No ✓ Yes. Identify the property:		

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 19 of 61

12. Is all or part of the claim	☑ No				
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check	one:	Amount entitled to priority		
A claim may be partly priority and partly		ic support obligations (including alimony and child support) unde $\mathbb{C}.\ \S \ 507(a)(1)(A)$ or $(a)(1)(B)$.	s		
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		2,850* of deposits toward purchase, lease, or rental of property o I, family, or household use. 11 U.S.C. § 507(a)(7).	r services for \$		
chance to phony.	bankrug	salaries, or commissions (up to \$12,850*) earned within 180 day try petition is filed or the debtor's business ends, whichever is each. § 507(a)(4).			
		r penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$		
	☐ Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$		
	_	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$		
		are subject to adjustment on 4/01/19 and every 3 years after that for cases	s begun on or after the date of adjustment		
	Amounts	ine subject to adjustment on 470 in 18 and every 6 years after that for dases	s began on or after the date of adjustment.		
Part 3: Sign Below					
Part 3: Sign Below					
The person completing this proof of claim must	Check the appro	priate box:			
sign and date it.	am the cre	ditor.			
FRBP 9011(b).	_	ditor's attorney or authorized agent.			
If you file this claim electronically, FRBP	_	stee, or the debtor, or their authorized agent. Bankruptcy Rule 30			
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
to establish local rules specifying what a signature					
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
person who files a					
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.				
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under p	penalty of perjury that the foregoing is true and correct.			
3571.	Executed on dat	e 08/24/2017 MM / DD / YYYY			
		^			
	/s/ Lisa N	I. Norman Sisam Norma	in		
	Print the name	of the person who is completing and signing this claim:			
	Name	Lisa M. Norman First name Middle name	Last name		
	Title	Attorney			
	Company	Andrews Myers, PC			
	Company	Identify the corporate servicer as the company if the authorized agent i	s a servicer,		
		1885 St. James Place, 15th Floor			
	Address	1885 St. James Place, 15th Floor Number Street			
		Houston TX	77056		
		City State	ZIP Code		
	Contact there	·	orman@andrewsmyers.com		
	Contact phone	TIO 000-7200 Email Life	on nanaganarowaniyera.com		

Becky
1
Personal injuries arising out of motor vehicle accident
Jackson, MI
Driving at about 55-60 mph, Becky went through a stop sign and was hit by an oncoming 18 wheeler
Death
No
10/12/04
2002 Pontiac Grand Am
To be determined (unliquidated)
Filed, GM MDL
Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may

Fill in this in	Fill in this information to identify the case:				
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭				
Debtor 2 (Spouse, if filing)	, 				
United States	Bankruptcy Court for the: Southern District of New York				
Case number	09-50026 (REG)				

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	art 1: Identify the Cl	aim					
1.	Who is the current creditor?	Mark Mayr Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	No Yes. From whom	?				
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman Name 1885 St. James Place, 15th Floor Number Street Houston TX 77056 City State ZIP Code Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com Uniform claim identifier for electronic payments in chapter 13 (if you compared to the contact of th		Name Number Street City Contact phone Contact email	yments to the creditor	ZIP Code	
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numb	er on court claims	s registry (if known)		Filed on) / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made t	he earlier filing?	-			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 22 of 61

6.	Do you have any number you use to identify the debtor?	No Ses. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	Does this amount include interest or other charges? ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch
9. is all or part of the claisecured?		No Yes. The claim is secured by a lien on property. Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe:
10	. Is this claim based on a lease?	No Yes. Amount necessary to cure any default as of the date of the petition.
11	. Is this claim subject to a right of setoff?	✓ No ☐ Yes. Identify the property:

Proof of Claim

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 23 of 61

12. Is all or part of the claim entitled to priority under	☑ No					
11 U.S.C. § 507(a)?	Yes. Check	one:				Amount entitled to priority
A claim may be partly priority and partly		c support obligations (including a c. § 507(a)(1)(A) or (a)(1)(B).	limony and child supp	ort) und	ler	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		,850* of deposits toward purchas , family, or household use. 11 U.		roperty	or services for	\$
onanos to promy	bankrupt	salaries, or commissions (up to \$ icy petition is filed or the debtor's C. § 507(a)(4).				\$
	☐ Taxes or	penalties owed to governmenta	l units. 11 U.S.C. § 50	7(a)(8).		\$
	Contribu	tions to an employee benefit plar	n. 11 U.S.C. § 507(a)(5).		\$
	Other. S	pecify subsection of 11 U.S.C. §	507(a)() that applie	s.		\$
	* Amounts a	re subject to adjustment on 4/01/19 a	nd every 3 years after tha	at for cas	es begun on or aft	er the date of adjustment.
				-		
Part 3: Sign Below						
The person completing	Check the approx	priate box:				
this proof of claim must sign and date it.	☐ I am the cree	ditor.				
FRBP 9011(b).	/					
If you file this claim	☐ I am the trus	stee, or the debtor, or their author	rized agent. Bankrupto	y Rule	3004.	
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guara	antor, surety, endorser, or other o	codebtor. Bankruptcy F	Rule 30	05.	
to establish local rules specifying what a signature						
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a						
fraudulent claim could be fined up to \$500,000,	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
imprisoned for up to 5 years, or both.	I declare under penalty of perjury that the foregoing is true and correct.					
18 U.S.C. §§ 152, 157, and 3571.	00/04/04/7					
	Executed on date	MM / DD / YYYY				
		Shina	m Dana		0	
	/s/ Lisa M	Norman ()	m. Noen	YV	11	
	Print the name of	of the person who is completin	g and signing this c	laim:		
		Lisa M. Norman				
	Name	First name	Middle name		Last name	
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the	ne company if the authoriz	zed ager	nt is a servicer.	
	Address	1885 St. James Place, 1	5th Floor			
	, (44) 033	Number Street				
		Houston		TX	77056	
		City		State	ZIP Code	
	Contact phone	713-850-4200	_	Email L	norman@and	drewsmyers.com

Last Name of Claimant	Mayr
First Name of Claimant	Mark
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Fayetteville, NC
Accident Description	While driving on U.S. 301, Mark veered off the road and in attempt
	to get back on the road, over corrected, lost control of vehicle, struck
	a tree and overturned on the northbound service road, coming to rest
	on the shoulder of the road.
Injury Description	Death
Airbag Deployed	No
Date of Injury	03/08/09
	0000 01 1 1 0 1 1 1 0
Year and Model of Vehicle	2008 Chevrolet Cobalt LS
Amount of Claim	To be determined (limideted)
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Filed, GM MDL
Tilor of Current Litigation	Thed, divi wide
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with
outy That Demand	respect to the adjudication of this claim. Pursuant to 28 U.S.C.
	§157(e), claimant does not consent to such jury trial being conducted
	in the United States Bankruptcy Court for the Southern District of
	Texas ("Bankruptcy Court").
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to
Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right
	to dispute the jurisdiction of the Bankruptcy Court to hear any
	proceeding, motion or other matter related to this claim or any other
	rights of claimant apart from this claim. Claimant hereby expressly
	does not consent to this claim being adjudicated in the Bankruptcy
	Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release
	any of claimant's rights against any other entity or person that may
	be liable for all or part of this claim.

Last Name of Claimant	Mayr
First Name of Claimant	Mark
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Fayetteville, NC
Accident Description	While driving on U.S. 301, Mark veered off the road and in attempt to get back on the road, over corrected, lost control of vehicle, struck a tree and overturned on the northbound service road, coming to rest on the shoulder of the road.
Injury Description	Death
Airbag Deployed	No
Date of Injury	03/08/09
	2
Year and Model of Vehicle	2008 Chevrolet Cobalt LS
A a Cole !	To be determined (sufficiently)
Amount of Claim	To be determined (unliquidated)
Duiza an Canana I itian tian	Ellad CM MDI
Prior or Current Litigation	Filed, GM MDL
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 26 of 61

Fill in this information to identify the case:			
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭		
Debtor 2 (Spouse, if filing			
United States	Bankruptcy Court for the: Southern District of New York		
Case number	09-50026 (REG)		

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	Part 1: Identify the Claim						
1.	Who is the current creditor?	Cory McCarthy Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	?				
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Where should payed different) Andrews Myers, PC - ATTN: Lisa M. Norman		ayments to the creditor b	e sent? (if		
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James F			Name		
		Number Street Houston City	TX State	77056 ZIP Code	Number Stree	State	ZIP Code
		Contact phone 713-85					===
		Contact email Lnorm	an@andrews	myers.com	Contact email		_
		Uniform claim identifier fo		nts in chapter 13 (if you u	,		
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numb	er on court claim	s registry (if known)		Filed on	/ YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made t	he earlier filing?				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 27 of 61

F	art 2: Give Informatio	on About the Claim as of the Date the Case Was Filed
6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	sunliquidated. Does this amount include interest or other charges?
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
3.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
		Limit disclosing information that is entitled to privacy, such as health care information.
		Personal injury claim - ignition switch
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe:
		Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
		Value of property: \$
		Amount of the claim that is secured: \$
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.)
		Amount necessary to cure any default as of the date of the petition:
		Annual Interest Rate (when case was filed)% Fixed Variable
10.	Is this claim based on a	
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.
1.	Is this claim subject to a	€ No
	right of setoff?	☐ Yes. Identify the property:

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 28 of 61

12. Is all or part of the claim entitled to priority under	☑ No ☐ Yes. Check	one'			Amount entitled to priority
11 U.S.C. § 507(a)? A claim may be partly priority and partly	☐ Domesti	s support obligations (including alimits, \$ 507(a)(1)(A) or (a)(1)(B).	ony and child support) und	der	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	☐ Up to \$2	850* of deposits toward purchase, I , family, or household use. 11 U.S.C		y or services for	\$
endued to phonty.	bankrupt	salaries, or commissions (up to \$12, cy petition is filed or the debtor's bu . § 507(a)(4).	850*) earned within 180 c siness ends, whichever is	days before the earlier.	\$
	☐ Taxes or	penalties owed to governmental un	its. 11 U.S.C. § 507(a)(8)		\$
	☐ Contribu	ions to an employee benefit plan. 1	1 U.S.C. § 507(a)(5).		\$
	Other. S	pecify subsection of 11 U.S.C. § 507	′(a)() that applies.		\$
	* Amounts a	e subject to adjustment on 4/01/19 and e	very 3 years after that for cas	ses begun on or afte	r the date of adjustment.
Part 3: Sign Below					
The person completing	Check the approp	oriate hox:			
this proof of claim must sign and date it.	am the cree				
FRBP 9011(b).	_/	litor's attorney or authorized agent.			
If you file this claim electronically, FRBP		tee, or the debtor, or their authorize			
5005(a)(2) authorizes courts to establish local rules	lam a guara	ntor, surety, endorser, or other code	ebtor. Bankruptcy Rule 30	105.	
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5		the information in this Proof of Clain			
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.				
3571.	Executed on date	08/24/2017 MM / DD / YYYY			
	/s/ Lisa M	Norman Sisan	1. Doemau	1	
	Print the name of	f the person who is completing a	nd signing this claim;		
	Name	Lisa M. Norman First name Mi	ddle name	Last name	
	Title	Attorney			
	Company	Andrews Myers, PC			
		Identify the corporate servicer as the co	ompany if the authorized age	nt is a servicer.	
	Address	1885 St. James Place, 15th	Floor		
		Number Street			
		Houston	TX	77056 ZIP Code	
	O and a district	City 713.850.4200	State		rowemvere com
	Contact phone	713-850-4200	Email L	.non <u>nanwanu</u>	rewsmyers.com

Last Name of Claimant	McCarthy, Deceased
First Name of Claimant	Cory
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Kingston, Ontario
Accident Description	Claimant lost power in his vehicle, the vehicle went out of control, resulting in fatal injuries to Claimant
Injury Description	Death
Airbag Deployed	No
Date of Injury	10/07/08
Year and Model of Vehicle	2006 Chevrolet HHR
Amount of Claim	To be determined (unliquidated)
	V O III . I ON ODDIV
Prior or Current Litigation	Yes - Collins, et al vs. GM - SDNY
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to
Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:					
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Q					
Debtor 2 (Spouse, if filing)					
United States	United States Bankruptcy Court for the: Southern District of New York				
Case number	09-50026 (REG)				

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	art 1: Identify the C	laim				
1.	Who is the current creditor?	John McDonough Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor				
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?				
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, PC - ATTN: Lisa M. Norman	Where should payments to the creditor be sent? (if different)			
		1885 St. James Place, 15th Floor Number Street Houston TX 77056 City State ZIP Code	Number Street City State ZIP Code			
		Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com	Contact email			
		Uniform claim identifier for electronic payments in chapter 13 (if you	u use one):			
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim number on court claims registry (if known)	Filed on			
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 31 of 61

Part 2: Give Information About the Claim as of the Date the Case Was Filed					
6.	Do you have any number you use to identify the debtor?	Poer No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
7.	How much is the claim?	S Does this amount include interest or other charges? ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).			
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch			
9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Pro Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security intexample, a mortgage, lien, certificate of title, financing statement, or other document that show been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: (The sum of the secured as		Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: (The sum of the secured and unsecured amounts should match the amount in line 7.)			
10	. Is this claim based on a lease?	☐ Fixed ☐ Variable ☑ No ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$			
11	. Is this claim subject to a right of setoff?	☑ No ☐ Yes. Identify the property:			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 32 of 61

12. Is all or part of the claim entitled to priority under	☑ No ☐ Yes. Check				Amount ontitled to priority
11 U.S.C. § 507(a)?				- d	Amount entitled to priorit
A claim may be partly priority and partly nonpriority. For example,		c support obligations (including alimony and child § 507(a)(1)(A) or (a)(1)(B).	support) ui	naer	\$
in some categories, the law limits the amount entitled to priority.	Up to \$ persona	,850* of deposits toward purchase, lease, or renta, family, or household use. 11 U.S.C. § 507(a)(7).	al of proper	ty or services for	\$
	bankrup	salaries, or commissions (up to \$12,850*) earned toy petition is filed or the debtor's business ends, $0.8507(a)(4)$.			\$
	Taxes o	penalties owed to governmental units. 11 U.S.C.	§ 507(a)(8	3).	\$
	☐ Contrib	tions to an employee benefit plan. 11 U.S.C. § 50	7(a)(5).		\$
	Other.	pecify subsection of 11 U.S.C. § 507(a)() that a	pplies.		\$
	* Amounts	re subject to adjustment on 4/01/19 and every 3 years af	ter that for c	ases begun on or aft	er the date of adjustment.
Part 3: Sign Below					
The person completing	Check the appro	nriata hav			
this proof of claim must	I am the cre				
sign and date it. FRBP 9011(b).		ditor. ditor's attorney or authorized agent.			
If you file this claim	_	stee, or the debtor, or their authorized agent. Bank	ruptcy Rul	e 3004.	
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
to establish local rules					
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the				
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.				
years, or both. 18 U.S.C. §§ 152, 157, and	i declare under				
3571.	Executed on da	09/19/2017 MM / DD / YYYY			
	/s/ Lisa N	. Norman Sisam Nor	ma	0_	
	Print the name	of the person who is completing and signing t	his claim:		
	Name	Lisa M. Norman First name Middle name		Last name	
	Title	Attorney			
		Andrews Myers, PC			
	Company	Identify the corporate servicer as the company if the a	uthorized ag	ent is a servicer.	
	Address	1885 St. James Place, 15th Floor			
		Number Street			
		Houston	TX	77056	
		City	State	ZIP Code	<u>ئ</u>
	Contact phone	713-850-4200	Email	Lnorman@an	drewsmyers.com

Last Name of Claimant	McDonough	
First Name of Claimant	John	
Nature of Claim	Personal injuries arising out of motor vehicle accident	
Accident Location	Beaufort, SC	
Accident Description	Client was rear ended by someone going more than 50 miles per hour which caused him to hit the vehicle in front of him	
Injury Description	Head trauma, mouth and spine injured	
Airbag Deployed	No	
Date of Injury	03/03/1998	
Year and Model of Vehicle		
A	77. 1 14 1 16 12 14 18	
Amount of Claim	To be determined (unliquidated)	
Prior or Current Litigation		
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").	
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.	
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.	

Fill in this information to identify the case:					
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors @					
Debtor 2 (Spouse, if filing) **				
United States Bankruptcy Court for the: Southern District of New York					
Case number	09-50026 (REG)				

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both, 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	Part 1: Identify the Cla	aim				
1.	Who is the current creditor?	Jacoby McLeod Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor				
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?				
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman	Where should payments to the creditor be sent? (if different)			
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James Place, 15th Floor Number Street	Name Number Street			
		Houston TX 77056 City State ZIP Code	City State ZIP Code			
		Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com	Contact phone			
		Uniform claim identifier for electronic payments in chapter 13 (if you u	se one):			
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim number on court claims registry (if known) _	Filed on			
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 35 of 61

F	Part 2: Give Information About the Claim as of the Date the Case Was Filed				
6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
7.	How much is the claim?	s <u>UNIQUIDATE</u> Does this amount include interest or other charges? No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).			
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch			
9.	Is all or part of the claim secured?	The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: \$			
10.	ls this claim based on a lease?	✓ No ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$			
11.	ls this claim subject to a right of setoff?	☑ No ☐ Yes. Identify the property:			

Official Form 410

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 36 of 61

12. Is all or part of the claim entitled to priority under	☑ No						
11 U.S.C. § 507(a)?	Yes. Check	one:		Amount entitled to priority			
A claim may be partly priority and partly		c support obligations (including alimony and child sup \mathbb{C}_{+}	port) under	\$			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		,850* of deposits toward purchase, lease, or rental of , family, or household use. 11 U.S.C. § 507(a)(7).	property or services for	\$			
	bankrupt	Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).					
	☐ Taxes or	☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).					
	Contribu	tions to an employee benefit plan. 11 U.S.C. § 507(a)	(5).	\$			
	Other. S	pecify subsection of 11 U.S.C. § 507(a)() that appli	es.	\$			
	* Amounts a	re subject to adjustment on 4/01/19 and every 3 years after the	nat for cases begun on or af	ter the date of adjustment.			
Part 3: Sign Below							
The person completing this proof of claim must	Check the approp	priate box:					
sign and date it.	I am the cred						
FRBP 9011(b).		ditor's attorney or authorized agent.					
If you file this claim electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.						
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules							
specifying what a signature is.		an authorized signature on this <i>Proof of Claim</i> serves im, the creditor gave the debtor credit for any payment					
A person who files a		,,,,,,,,,,					
fraudulent claim could be fined up to \$500,000,	I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.						
imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.	Executed on date 08/24/2017						
	MM / DD / YYYY						
	/s/ Lisa M	Norman Lisam Joem	ian				
	Print the name of	of the person who is completing and signing this o	claim:				
	Name	Lisa M. Norman					
	Ivaille	First name Middle name	Last name				
	Title	Attorney					
	Company	Andrews Myers, PC					
		Identify the corporate servicer as the company if the author	rized agent is a servicer.				
	Address	1885 St. James Place, 15th Floor					
		Number Street					
		Houston	TX 77056				
		City	State ZIP Code				
	Contact phone	713-850-4200	Email Lnorman@an	drewsmyers.com			

Last Name of Claimant	McLeod
First Name of Claimant	Jacoby
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	June Lake, California
Accident Description	Claimant struck a semi head-on that had turned over in whiteout conditions
Injury Description	Claimant suffered a head injury, was in the ICU for 3-4 days, and hospitalized for 2 weeks. Due to his injuries, he had to wear a helmet for 1 year.
Airbag Deployed	No
Date of Injury	01/20/2000
Year and Model of Vehicle	2000 Oldsmobile Alero
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:			
Debtor 1 Motors Liquidation Company, et al. f/k/a Ge	neral Motors 🚰		
Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the: Southern District of New York			
Case number 09-50026 (REG)			

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the Information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1.	Who is the current creditor?	Sheryl Morrison					
		Name of the current credit	or (the person or e	entity to be paid for this cla	aim)		
		Other names the creditor of	used with the debt	or			
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?					
and payments to the different)		payments to the creditor	be sent? (if				
	Federal Rule of	Andrews Myers, F	C - ATTN: L	isa M. Norman			
	Bankruptcy Procedure	Name			Name		
	(FRBP) 2002(g)	1885 St. James P	ace, 15th Flo	oor	Number Stre	oot .	
		Houston	TX	77056	rumber 500	56(
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 713-85			R-10		
		Contact email Lnorma	in@andrews	myers.com	Contact email		<u> </u>
		Uniform claim identifier for	electronic payme	ents in chapter 13 (if you u	use one):		
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim number	r on court claim	ns registry (if known)		Filed on	D / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the	ne earlier filling?	-			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 39 of 61

P	art 2: Give Informatio	n About the Claim as of the Date the Case Was Filed			
6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
7.	How much is the claim?	\$ Does this amount include interest or other charges?			
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).			
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.			
		Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).			
		Limit disclosing information that is entitled to privacy, such as health care information.			
		Personal injury claim - ignition switch			
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim			
		Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe:			
		Basis for perfection:			
		Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)			
		Value of property: \$			
		Amount of the claim that is secured: \$			
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.)			
		Amount necessary to cure any default as of the date of the petition: \$			
		Annual Interest Rate (when case was filed)% Fixed Variable			
10	. Is this claim based on a	2 No			
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.			
11	. Is this claim subject to a	☑ No			
	right of setoff?	☐ Yes. Identify the property:			

Proof of Claim

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 40 of 61

12. Is all or part of the claim entitled to priority under	☑ No				
11 U.S.C. § 507(a)?	Yes. Check				Amount entitled to priority
A claim may be partly priority and partly		c support obligations (including alimony and child s C. § 507(a)(1)(A) or (a)(1)(B).	support) u	nder	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		,850* of deposits toward purchase, lease, or rental I, family, or household use. 11 U.S.C. § 507(a)(7).	of proper	rty or services for	\$
ommos to promy.	bankrup	salaries, or commissions (up to \$12,850*) earned water petition is filed or the debtor's business ends, wow. \$507(a)(4).			\$
	_	r penalties owed to governmental units. 11 U.S.C.	§ 507(a)(8	B).	\$
	☐ Contribu	itions to an employee benefit plan. 11 U.S.C. § 507	7(a)(5)		\$
	_				\$
		pecify subsection of 11 U.S.C. § 507(a)() that ap			Ψ
	* Amounts a	re subject to adjustment on 4/01/19 and every 3 years afte	er that for c	cases begun on or afte	er the date of adjustment.
Part 3: Sign Below					
The person completing	Check the appro	priate box:			
this proof of claim must sign and date it.	☐ I am the cre	ditor.			
FRBP 9011(b).	/	ditor's attorney or authorized agent.			
If you file this claim	_	stee, or the debtor, or their authorized agent. Bankı	ruptcy Ru	le 3004.	
electronically, FRBP 5005(a)(2) authorizes courts	l am a guara	antor, surety, endorser, or other codebtor. Bankrup	tcy Rule 3	3005.	
to establish local rules					
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	the information in this <i>Proof of Claim</i> and have a re	easonable	e belief that the info	ormation is true
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.				
3571.	Executed on date	9 09/19/2017 MM / DD / YYYY			
	/s/ Lisa M	. Norman Sisam Ook	ma	V	
	Print the name	of the person who is completing and signing th	is claim:		
	Name	Lisa M. Norman			
		First name Middle name		Last name	
	Title	Attorney			
	Company	Andrews Myers, PC Identify the corporate servicer as the company if the au	thorized ag	gent is a servicer.	
	Address	1885 St. James Place, 15th Floor			
	Addless	Number Street			
		Houston	TX	77056	
		City	State	ZIP Code	
	Contact phone	713-850-4200	Email	Lnorman@and	drewsmyers.com

Last Name of Claimant	Morrison
First Name of Claimant	Sheryl
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Charlotte Hill, MD
Accident Description	Claimant is bringing a claim on behalf of her husband, Thomas. Thomas was travelling on a country road when he crashed into a small tree
Injury Description	Thomas died from "multiple injuries." Autopsy reported multiple injuries to the head (frontal scalp hematoma, cerebellar subarachnoid hematoma, abrasions/contusions of the face), neck, torso, and all extremities (abrasions/contusions), internal injuries to the head and torso including, but not limited to, fractured sternum, fractured ribs, bilateral hemothorax (spine), heart lacerations, and transected descending thoracic aorta.
Airbag Deployed	No
M 1	
Date of Injury	5/7/2008
7	
Year and Model of Vehicle	2003 Cadillac DeVille
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Panlamento	Du vietus of filing this
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:		
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭	
Debtor 2 (Spouse, if filing		
United States	Bankruptcy Court for the: Southern District of New York	
Case number	09-50026 (REG)	

Proof of Claim 04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

P	art 1: Identify the C	aim			
1.	Who is the current creditor?	Phillip Morton Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor			
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?			
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, PC - ATTN: Lisa M. Norman Name 1885 St. James Place, 15th Floor Number Street Houston TX 77056 City State ZIP Code Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone Contact email		
4.	Does this claim amend one already filed?	✓ No☐ Yes. Claim number on court claims registry (if known)	Filed on		
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 43 of 61

F	art 2: Give Informatio	n About the Claim as of the Date the Case Was Filed		
6.	Do you have any number you use to identify the debtor?	✓ No ☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:		
7.	How much is the claim?	sunliquidated. Does this amount include interest or other charges?		
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).		
3.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.		
	claim?	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).		
		Limit disclosing information that is entitled to privacy, such as health care information.		
		Personal injury claim - ignition switch		
9.		<u>✓</u> No		
	secured?	Yes. The claim is secured by a lien on property.		
		Nature of property:		
		Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.		
		Motor vehicle		
		Other. Describe:		
		Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for		
		example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)		
		Value of property: \$		
		Amount of the claim that is secured: \$		
		Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line 7.		
		Amount necessary to cure any default as of the date of the petition:		
		Annual Interest Rate (when case was filed) %		
		Fixed		
		☐ Variable		
0	. Is this claim based on a	✓ No		
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.		
1	Is this claim subject to a	☑ No		
	right of setoff?	☐ Yes. Identify the property:		

Proof of Claim

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 44 of 61

12. Is all or part of the claim entitled to priority under	☑ No					
11 U.S.C. § 507(a)?	Yes. Check	one:			Amount entitled to priority	
A claim may be partly priority and partly	Domestic 11 U.S.C	\$				
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2 personal	\$				
Ontition to priority	bankrupt	salaries, or commissions (up to \$12,850*) earned with cy petition is filed or the debtor's business ends, whic c. § 507(a)(4).	nin 180 da chever is e	nys before the earlier.	\$	
	☐ Taxes or	penalties owed to governmental units. 11 U.S.C. § 50	07(a)(8).		\$	
	☐ Contribu	tions to an employee benefit plan. 11 U.S.C. § 507(a)	(5).		\$	
	Other. S	pecify subsection of 11 U.S.C. § 507(a)() that appli	es.		\$	
	* Amounts a	re subject to adjustment on 4/01/19 and every 3 years after th	nat for case	es begun on or af	ter the date of adjustment.	
Part 3: Sign Below						
rattor olgir below						
The person completing this proof of claim must	Check the approp	priate box:				
sign and date it.	am the cred	ditor.				
FRBP 9011(b).	☑ I am the cree	ditor's attorney or authorized agent.				
If you file this claim	I am the trus	tee, or the debtor, or their authorized agent. Bankrup	tcy Rule 3	3004.		
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules						
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a	amount of the claim, the creditor gave the deptor credit for any payments received toward the dept.					
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date	08/24/2017 MM / DD / YYYY				
		0				
	/s/ Lisa M	Norman Sisam. Doc	ma	<u>n</u>		
	Print the name of	of the person who is completing and signing this	claim:			
	Name	Lisa M. Norman				
	Traino	First name Middle name		Last name		
	Title	Attorney				
	Company	Andrews Myers, PC Identify the corporate servicer as the company if the author	rized agen	t is a servicer.	*	
	A	1885 St. James Place, 15th Floor				
	Address	Number Street			*	
		Houston	TX	77056		
		City	State	ZIP Code		
	Contact phone	713-850-4200	Email LI	norman@an	drewsmyers.com	
	· · · · · · · · · · · · · · · · · · ·					

Last Name of Claimant	Morton
First Name of Claimant	Phillip
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	TX
Accident Description	The driver of the other vehicle ran a stop sign and pulled out in front of Claimant. Claimant's front end collided with the other vehicle.
Injury Description	Claimant suffered a broken left leg and underwent reconstructive surgery
Airbag Deployed	No
Date of Injury	07/16/2008
Year and Model of Vehicle	2003 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:		
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭	
Debtor 2 (Spouse, if filing)		
United States	Bankruptcy Court for the: Southern District of New York	
Case number	09-50026 (REG)	

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	art 1: Identify the CI	aim					
1.	Who is the current creditor?	Michael Nichols Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?					
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)		nere should notices to the creditor be sent? Where should payments to the creditor different) andrews Myers, PC - ATTN: Lisa M. Norman			ld payments to the creditor be	∍ sent? (if
		Name 1885 St. James Place			Name	Street	
		Houston City	TX State	77056 ZIP Code	City	State	ZIP Code
		Contact phone 713-850-42 Contact email Lnorman@		myers.com	Contact phone		-
		Uniform claim identifier for elect	ronic paymeı — — — –	nts in chapter 13 (if you us	se one):		
4.	Does this claim amend one already filed?	✓ No✓ Yes. Claim number on	court claims	s registry (if known)		Filed on MM / DD	/ YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the ea	rlier filing?				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 47 of 61

F	art 2: Give Informatio	n About the Claim as of the Date the Case Was Filed
6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	Does this amount include interest or other charges? □ No □ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch
9.	Is all or part of the claim secured?	Noture of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle
10). Is this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$
11	. Is this claim subject to a right of setoff?	✓ No ☐ Yes. Identify the property:

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 48 of 61

12. Is all or part of the claim	☑ No					
entitled to priority under	Yes. Check	one:		Amount entitled to priority		
11 U.S.C. § 507(a)? A claim may be partly priority and partly	☐ Domest	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).				
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$	2,850* of deposits toward purchase, lease, or rental o il, family, or household use. 11 U.S.C. § 507(a)(7).	f property	or services for \$		
challed to phony.	bankrup	salaries, or commissions (up to $12,850$) earned with otcy petition is filed or the debtor's business ends, while $0.$ § $507(a)(4)$.	hin 180 da chever is e	ays before the earlier. \$		
	☐ Taxes o	r penalties owed to governmental units. 11 U.S.C. § 5	507(a)(8).	\$		
	☐ Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a	1)(5).	\$		
	_	Specify subsection of 11 U.S.C. § 507(a)() that app		\$		
				<u> </u>		
	* Amounts a	tre subject to adjustment on 4/01/19 and every 3 years after	that for case	es begun on or after the date of adjustment.		
Part 3: Sign Below						
The person completing	Check the appro	priate box:				
this proof of claim must sign and date it.	☐ I am the cre	editor.				
FRBP 9011(b).	☑ I am the cre	editor's attorney or authorized agent.				
If you file this claim	_	stee, or the debtor, or their authorized agent. Bankru	otcy Rule 3	3004.		
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules						
specifying what a signature is.	I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the					
	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 09/19/2017 MM / DD / YYYY					
	/s/ Lisa N	1. Norman Sisam. Nor	ema	Δ		
	Print the name	of the person who is completing and signing this	claim:			
	Name	Lisa M. Norman First name Middle name		Last name		
				Last Hallie		
	Title	Attorney				
	Company	Andrews Myers, PC Identify the corporate servicer as the company if the author	orized agent	t is a servicer.		
	Addross	1885 St. James Place, 15th Floor				
	Address	Number Street				
		Houston	TX	77056		
		City	State	ZIP Code		
	Contact phone	713-850-4200	Email I	norman@andrewsmyers.com		
	CONTACT DITORIE	7 10 000 1200	Lilian L			

Last Name of Claimant	Nichols
First Name of Claimant	Michael
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Missouri
Accident Description	Claimant is bringing a claim on behalf of Ross Nichols. Nichols'
-	vehicle veered to the left before spinning out of control across the
ž	highway to the right, struck the guardrail, flipped, and rolled down
	an embankment
Injury Description	Death
Airbag Deployed	No
Date of Injury	06/12/2006
Year and Model of Vehicle	2004 Chevrolet Malibu
	8
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with
	respect to the adjudication of this claim. Pursuant to 28 U.S.C.
	§157(e), claimant does not consent to such jury trial being
	conducted in the United States Bankruptcy Court for the Southern
1777	District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to
Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right
	to dispute the jurisdiction of the Bankruptcy Court to hear any
	proceeding, motion or other matter related to this claim or any other
	rights of claimant apart from this claim. Claimant hereby expressly
	does not consent to this claim being adjudicated in the Bankruptcy
	Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release
	any of claimant's rights against any other entity or person that may
	be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭			
Debtor 2 (Spouse, if filing)	Debtor 2 (Spouse, if filing)			
United States 6	United States Bankruptcy Court for the: Southern District of New York			
Case number	09-50026 (REG)			

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	Part 1: Identify the Cl	aim			
1.	Who is the current creditor?	Perry Owens, Sr. Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor			
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?	-		
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman Name Name			
	Bankruptcy Procedure (FRBP) 2002(g)	1885 St. James Place, 15th Floor Number Street Houston TX 77056	Number Street		
		City State ZIP Code Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com	City State ZIP Code Contact phone Contact email		
		Uniform claim identifier for electronic payments in chapter 13 (if you u			
4.	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed on		
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 51 of 61

F	art 2: Give Information	on About the Claim as of the Date the Case Was Filed
6.	Do you have any number you use to identify the debtor?	No Ses. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	SUNGUED Does this amount include interest or other charges? ☐ No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch
9.	Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Nature of property: Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe:
10	. Is this claim based on a lease?	☑ No ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$
11	ls this claim subject to a right of setoff?	✓ No ☐ Yes. Identify the property:

Proof of Claim

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 52 of 61

12. Is all or part of the claim	☑ No							
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	one:		Amount entitled to priority				
A claim may be partly priority and partly		Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).						
nonpriority. For example, in some categories, the law limits the amount		Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).						
entitled to priority.	bankrup	bankruptcy petition is filed or the debtor's business ends, whichever is earlier.						
		C. § 507(a)(4).	A=(\(A)	O				
	☐ Taxes o	r penalties owed to governmental units. 11 U.S.C. § 5	07(a)(8).	Φ				
	☐ Contribu	itions to an employee benefit plan. 11 U.S.C. § 507(a)	(5).	\$				
	Other. 8	Specify subsection of 11 U.S.C. § 507(a)() that appli	es.	\$				
		tre subject to adjustment on 4/01/19 and every 3 years after th		ses begun on or after the date of adjustment.				
Part 3: Sign Below								
The person completing	Check the appro	priate box:						
this proof of claim must		•						
sign and date it. FRBP 9011(b).	☐ I am the creditor. ☐ I am the creditor's attorney or authorized agent.							
If you file this claim	☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.							
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.							
to establish local rules								
specifying what a signature is.		t an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the						
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.							
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	the information in this <i>Proof of Claim</i> and have a reas	sonable I	pelief that the information is true				
years, or both. 18 U.S.C. §§ 152, 157, and	l declare under j	enalty of perjury that the foregoing is true and correct.						
3571.	Executed on dat	e 08/24/2017						
		^						
	/s/ Lisa N	1. Norman Sam. Doc	ma	Δ				
	-	of the person who is completing and signing this	claim:					
	T THIC CITO Harris	of the person who is completing and eighning and	J. G. 1111					
	Name	Lisa M. Norman						
		First name Middle name		Last name				
	Title	Attorney						
	Company	Andrews Myers, PC						
Identify the corporate servicer as the company if the authorized agent is a service				nt is a servicer,				
	Address	1885 St. James Place, 15th Floor						
Number Street								
		Houston	TX	77056				
		City	State	ZIP Code				
	Contact phone	713-850-4200	Email L	norman@andrewsmyers.com				

Last Name of Claimant	Owens
First Name of Claimant	Perry Sr.
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Ste. Genevieve, MO
Accident Description	Perry was the driver traveling at about 95 mph, fell asleep at the wheel veered of the roadway into a grass median. Perry lost control of the vehicle and in attempt to steer it back on the roadway, the vehicle rolled, landed back on it's wheels and the rear wheel detached. Dominique was ejected from the vehicle through the back window
Injury Description	Severe muscular dystrophy from being in coma for 3 months
Airbag Deployed	No
Date of Injury	08/17/01
Year and Model of Vehicle	2002 Chevrolet Trailblazer
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Filed, GM MDL
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Paulymenter	By virtue of filing this proof of claim, claimant does not consent to
No Consent to Bankruptcy Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
D4'6D'-14	The films of this was of of alaims is not intended to such as a second
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

Fill in this information to identify the case:				
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors				
Debtor 2 (Spouse, if filing)				
United States	United States Bankruptcy Court for the: Southern District of New York			
Case number	09-50026 (REG)			

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

1	Part 1: Identify the Claim						
1.	Who is the current creditor?	Randy Parker Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?	?				
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Contact phone 713-850-4200 Contact phone				State	ZIP Code
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim numbe	er on court claims	s registry (if known)		Filed on) / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the	he earlier filing?				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 55 of 61

F	Part 2: Give Information About the Claim as of the Date the Case Was Filed					
6.	Do you have any number you use to identify the debtor?	No No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:				
7.	How much is the claim?	Does this amount include interest or other charges? No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch				
9.	Is all or part of the claim secured?	No				
10	ls this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$				
11	. Is this claim subject to a right of setoff?	☑ Yes. Identify the property:				

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 56 of 61

12. Is all or part of the claim	☑ No					
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	one:		Amount entitled to priority		
A claim may be partly priority and partly		ic support obligations (including alimony and child su C. \S 507(a)(1)(A) or (a)(1)(B).	apport) u	nder \$		
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).					
et.	bankrup	salaries, or commissions (up to \$12,850*) earned wi toy petition is filed or the debtor's business ends, wh C. § 507(a)(4).	ithin 180 iichever	days before the searlier.		
	☐ Taxes o	r penalties owed to governmental units. 11 U.S.C. §	507(a)(8	3).		
	☐ Contribu	utions to an employee benefit plan. 11 U.S.C. § 507(a	a)(5).	\$		
				\$		
		Specify subsection of 11 U.S.C. § 507(a)() that app		Ψ		
	* Amounts a	are subject to adjustment on 4/01/19 and every 3 years after	that for c	ases begun on or after the date of adjustment.		
Part 3: Sign Below						
The person completing	Check the appro	priate box:				
this proof of claim must sign and date it.	☐ I am the creditor.					
FRBP 9011(b).	☑ I am the creditor's attorney or authorized agent.					
If you file this claim	☐ I am the tru	stee, or the debtor, or their authorized agent. Bankru	iptcy Ru	le 3004.		
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules						
is. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that whe amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. In the diamit, the dictate gase the distribution of Claim and have a reasonable belief that the information is the diamit, the dictate gase the distribution of the diamit, the distribution of the distribution of the diamit, the distribution of			d have a reasonable belief that the information is true			
	Executed on dat	MM / DD / YYYY				
/s/ Lisa M. Norman Signature						
	Print the name	of the person who is completing and signing this	s claim:			
	Name	Lisa M. Norman First name Middle name		Last name		
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the company if the auth	norized ag	ent is a servicer.		
Address 1885 St. James Place, 15th Floor						
		Number Street				
		Houston	TX	77056		
		City	State	ZIP Code		
	Contact phone	713-850-4200	Email	Lnorman@andrewsmyers.com		

page 3

Last Name of Claimant	Parker			
First Name of Claimant	Randy			
Nature of Claim	Personal injuries arising out of motor vehicle accident			
Accident Location	Bexar County, Texas			
Accident Description	Claimant was driving down the freeway when a car in front of his			
	stalled, causing him to strike them from the rear, resulting in severe			
	and permanent injuries to Claimant			
Injury Description	Broken Collar Bone; Torn Ligaments in Shoulder			
Airbag Deployed	No			
Date of Injury	12:00:00 AM			
Year and Model of Vehicle	2008 Chevrolet HHR			
Amount of Claim	To be determined (unliquidated)			
Prior or Current Litigation	No			
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of			
	Texas ("Bankruptcy Court").			
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to			
Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.			
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 58 of 61

Fill in this information to identify the case:				
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭			
Debtor 2 (Spouse, if filing)				
United States	United States Bankruptcy Court for the: Southern District of New York			
Case number	09-50026 (REG)			

Official Form 410

Proof of Claim 04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

F	Part 1: Identify the Cl	aim			
1.	Who is the current creditor?	Alyssa Perrino Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor			
2.	Has this claim been acquired from someone else?	☑ No □ Yes, From whom?			
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, PC - ATTN: Lisa M. Norman Name 1885 St. James Place, 15th Floor Number Street Houston TX 77056 City State ZIP Code Contact phone 713-850-4200 Contact email Lnorman@andrewsmyers.com	,		
4.	Does this claim amend one already filed?	✓ No☐ Yes. Claim number on court claims registry (if known) _	Filed onMM / DD / YYYY		
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the earlier filing?			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 59 of 61

į	Part 2: Give Information About the Claim as of the Date the Case Was Filed				
6.	Do you have any number you use to identify the debtor?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
7.	How much is the claim?	Does this amount include interest or other charges? No ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).			
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Personal injury claim - ignition switch			
9.	Is all or part of the claim secured?	all or part of the claim ☑ No			
10	. Is this claim based on a lease?	✓ No Yes. Amount necessary to cure any default as of the date of the petition. \$			
11	. Is this claim subject to a right of setoff?	✓ No ☐ Yes. Identify the property:			

09-50026-mg Doc 14112-4 Filed 09/19/17 Entered 09/19/17 19:54:12 Exhibit Ex B-3 Pg 60 of 61

12. Is all or part of the claim					
entitled to priority under 11 U.S.C. § 507(a)?		one:			Amount entitled to priority
A claim may be partly priority and partly		ic support obligations (including C. § 507(a)(1)(A) or (a)(1)(B).	alimony and child suppo	ort) under	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$ persons	services for \$			
endied to phonty.	bankru	salaries, or commissions (up to otcy petition is filed or the debtor' C. § 507(a)(4).	\$12,850*) earned withir s business ends, which	180 days ever is ear	before the lier. \$
	☐ Taxes o	or penalties owed to government	al units. 11 U.S.C. § 507	'(a)(8).	\$
	☐ Contrib	utions to an employee benefit pla	n. 11 U.S.C. § 507(a)(5).	\$
	Other.	Specify subsection of 11 U.S.C.	\$ 507(a)() that applies	i.	\$
		141			egun on or after the date of adjustment
Part 3: Sign Below					
The person completing this proof of claim must	Check the appro	ppriate box:			
sign and date it.	am the cre	editor.			
FRBP 9011(b).	I am the creditor's attorney or authorized agent.				
If you file this claim	☐ I am the tru	stee, or the debtor, or their auth	orized agent. Bankrupto	y Rule 300	4.
electronically, FRBP 5005(a)(2) authorizes courts	l am a guar	antor, surety, endorser, or other	codebtor. Bankruptcy R	ule 3005.	
to establish local rules specifying what a signature I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when c					
				owledgment that when calculating the	
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5				of that the information is true	
years, or both. 18 U.S.C. §§ 152, 157, and 3571. I declare under penalty of perjury that the foregoing is true and correct. Executed on date 08/24/2017 MM / DD / YYYY /s/ Lisa M. Norman Signature					
	Print the name of the person who is completing and signing this claim:				
	Name	Lisa M. Norman	Middle name		Last name
	Title	Attorney			
	Company	Andrews Myers, PC			
	• •	Identify the corporate servicer as	the company if the authoriz	ed agent is	a servicer.
	Address	1885 St. James Place,	15th Floor		
		Number Street			
		Houston	-	ΓX	77056
		City		State	ZIP Code
	Contact phone	713-850-4200	E	mail Lno	rman@andrewsmyers.com

Last Name of Claimant	Perrino			
First Name of Claimant	Alyssa			
Nature of Claim	Personal injuries arising out of motor vehicle accident			
Accident Location	Tampa, Florida			
Accident Description	Claimant was a passenger in a vehicle that was pushed into another vehicle, resulting in severe and permanent injuries to Claimant			
Injury Description	Traumatic Brain Injury			
Airbag Deployed	No			
Date of Injury	02/16/07			
Year and Model of Vehicle	2006 Saturn Ion			
Amount of Claim	To be determined (unliquidated)			
Prior or Current Litigation	No			
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").			
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.			
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.			